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CONFIRMATION NO. 3392

<b>SERIAL NUMBER</b> 10/751,204	<b>FILING OR 371(c) DATE</b> 01/02/2004 <b>RULE</b>	<b>CLASS</b> 362	<b>GROUP ART UNIT</b> 2627	<b>ATTORNEY DOCKET NO.</b> 3715-029
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**APPLICANTS**

Michelle Jillian Fuwaua, Columbia, MD;

**\*\* CONTINUING DATA \*\*\*\*\*** *Yes, AC*

This appln claims benefit of 60/437,425 01/02/2003 and claims benefit of 60/465,460 04/28/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *AC***IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
04/13/2004**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials <i>AC</i>				

**ADDRESS**

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**TITLE**

Illuminated devices using UV-LED's

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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